

NPM #7: Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

a) Report of 2003 Major Activities

1. Providing, Monitoring, and Assuring Immunizations—Direct Health Care Services—Children, including CSHCN

All 93 LPHDs provided immunizations to persons in their jurisdiction with funding from the state Immunization Program. All 93 LPHDs can now access electronically immunization data from the Wisconsin Immunization Registry (WIR). Ten LPHDs worked directly with child care providers using Title V funds to monitor immunization services of children attending child care, referring those children needing immunizations to appropriate resources, using consolidated contract funds. Forty-eight percent of the 93 LPHDs provided or assured primary care services to children under age 12 including immunization compliance. The data from the national immunization survey for Wisconsin for SFY 2003 (July 1, 2002-June 30, 2003) with 4 DTap; Polio; 1 MMR; 3 Hep B; 3 Hib among children 19-35 months of age for Wisconsin is 82.6%, which exceeds our 2003 target of 79%.

2. Coordination with WIC and the state Immunization Programs and enrollment in the Wisconsin Immunization Registry (WIR)—Infrastructure Building Services—Pregnant women, mothers and infants and children, including CSHCN

Coordination with the WIC program continues, with now all of the WIC providers during 2003, enrolled in the WIR. Currently we have over 550 immunization providers and some 2,000 schools with access to WIR with a total of 8,300 users throughout the state. These providers account for 18 million immunizations given to 2.6 million clients. The Wisconsin Immunization Program cost shares with WIC to conduct immunization assessments and refers at WIC voucher pick-up. WIR automatically updates immunization schedule changes into the recall system.

3. Tracking and Sharing Policy Changes or Clinical Practices by the State Immunization Program—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

The Advisory Committee on Immunization Practices (CDC) recently recommended routine annual vaccination with influenza vaccine for all healthy children 6 month to 24 months of age.

4. Tracking Children at Age Two Enrolled in Medicaid—Population-Based Services—Children, including CSHCN

This is tracking to meet requirements of the Government Performance and Result Act (GPRA). The base line among Medicaid enrolled Wisconsin children ages 19-35 months who are series complete* was 41% in 2001 and rose to 55% in 2002. The third (and final year of GPRA) target rate is 65%. [*Series complete = 4DTaP, 3 polio, 1 MMR, 3 Hib, and 3 Hep B].

5. Racial and Ethnic Disparities in Milwaukee—Population-Based Services—Pregnant women and mothers

Baseline data has been established among racial and ethnic groups in Milwaukee. Among persons 65+ years of age the rates for influenza vaccination in African Americans is 57.1% and Caucasians is 76.2%. For pneumococcal vaccine in the same age group, the rates are 53.9% for African Americans and 73.0% for Caucasians.

b) Current 2004 Activities

1. Providing, Monitoring and Assuring Immunizations—Direct Health Care Services—Children, including CSHCN

All 93 LPHDs receive state Immunization Program funding and at least three agencies currently coordinate their activities with additional Title V MCH funding. Twelve LPHDs are using MCH funding to address child health including immunization in child care settings.

2. Coordination with WIC and the State Immunization Programs and Enrollment in the Wisconsin Immunization Registry (WIR)—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

WIR plans to support and maintain WIC sites as registry program participants. Immunization data will be provided by the state Immunization Program to the Title V MCH/CSHCN Program for required annual reporting.

3. Tracking and Sharing Policy Changes or Clinical Practices by the State Immunization Program—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

National and international circumstances that result in recommended changes in the immunization schedule will be tracked by the state Immunization Program. Recommended changes will be determined by the ACIP and shared appropriately by the state Immunization Program. An effort to build a consortium of LPHDs, CHCs, and tribes to increase immunization compliance levels is occurring with leadership from the state Immunization Program.

4. Tracking Children at Age Two Enrolled in Medicaid—Population-Based Services—Children, including CSHCN

The statewide tracking of Medicaid-enrolled children at age two with up-to-date immunizations will continue through 2004. The goal remains at 90%.

5. Racial and Ethnic Disparities in Milwaukee—Population-Based Services—Pregnant women and mothers

The two-year study funded by CDC to look at racial and ethnic disparities in Milwaukee related to adults receiving preventive influenza and pneumonia vaccines will continue through 2004. Some of the activities in place to improve levels next year include: use of the WIR, targeting primary health care providers serving the target populations, improving clinic procedures (e.g. standing orders, chart reminders, reminder/recall), faith based organizations promote immunizations, mass media coverage, etc.

c) 2005 Plan/Application

1. Providing, Monitoring and Assuring Immunizations—Direct Health Care Services—Children, including CSHCN

Title V funding will continue to support LPHDs interested in providing or assuring primary care services to young children, including immunization monitoring and compliance. This activity will continue to take place in child care settings (among other sites) throughout the state. State Immunization Program funds will continue to support all LPHDs to provide/assure immunizations to those they serve.

2. Coordination with WIC and the State Immunization Programs and Enrollment in the Wisconsin Immunization Registry (WIR)—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

The state Immunization Program will continue partnerships with the Title V MCH/CSHCN Program, LPHDs, the WIC Program, the Medicaid Program, tribes, and CHCs. The statewide registry will be expanded and refined as experience and policy changes dictate. The provision of needed data requirements by the Title V MCH/CSHCN Program will be provided annually by the state Immunization Program.

3. Tracking and Sharing Policy Changes or Clinical Practices by the State Immunization Program—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

National and international circumstances that result in subsequent policy changes or clinical practices will be tracked by the state Immunization Program. Timely information updates will be shared by the state Immunization Program with appropriate partners.

4. Tracking Children at Age Two Enrolled in Medicaid—Population-Based Services—Children, including CSHCN

Statewide tracking of Medicaid-enrolled children with up-to-date immunization status at age two will continue.